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ABOUT COMMUNITY CHOICES 2010

HISTORY

In 1993, the Southwest Washington Health District (now Clark County Public Health) commissioned a study to assess the overall well-being of the people of Clark County, Washington. This year-long assessment examined the interrelated and multi-dimensional components affecting the health of the community: education, the economy, health care, the environment, personal health-related behaviors, and "social" health, including substance abuse, homelessness, child care, and violence.

The findings signaled some troubling trends. The rate of cigarette smoking was among the highest in the state, Clark County lagged behind the state in percent of college graduates, and the average wage paid for jobs in Clark County had dropped a steep 12% during the 1980's.

The study's findings mobilized Clark County residents and community leaders to develop a plan of action. Their goal: to look twenty years into the future and envision the kind of community Clark County had the potential to become. Community Choices 2010 was created to help the community take the necessary steps to achieve that vision.

PURPOSE

Community Choices 2010 (CC2010) is a community-based, broadly supported, nonprofit organization. Our mission is to be a catalyst for a healthy, livable Clark County. CC2010 regularly assesses local demographic and community health data. Our purpose is to serve as an objective convener of, and collaborator with, community partners to build awareness and to promote the improvement of the overall health of the community using early prevention strategies.

STRATEGY

Every three years CC2010 gathers crucial data on community health indicators to measure progress toward a healthy, livable Clark County. When available, comparisons are made to the national health objectives from Healthy People 2010, the nationwide health promotion and disease prevention agenda, or other relevant target goals. In addition, CC2010 convenes local, regional and national partners to focus on specific health outcomes, to identify and address barriers to improvement, and to monitor progress with measurable results along the way.

TAKING ACTION

The 2006 Community Report Card is a springboard for community action. We encourage you to get involved. By working together, we can ensure a healthy, livable Clark County for generations to come. For more information about the data included in this report, visit our website at:

www.communitychoices2010.com

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Executive Summary



In the 2006 Community Report Card, we have added "Policy Watch" sections located in the sidebar columns throughout the report.

The purpose of the Policy Watch sections is to aid civic and community action by suggesting specific areas which need the attention of community leaders and Clark County residents. Together, we can meet our goal of creating a healthy, livable community.

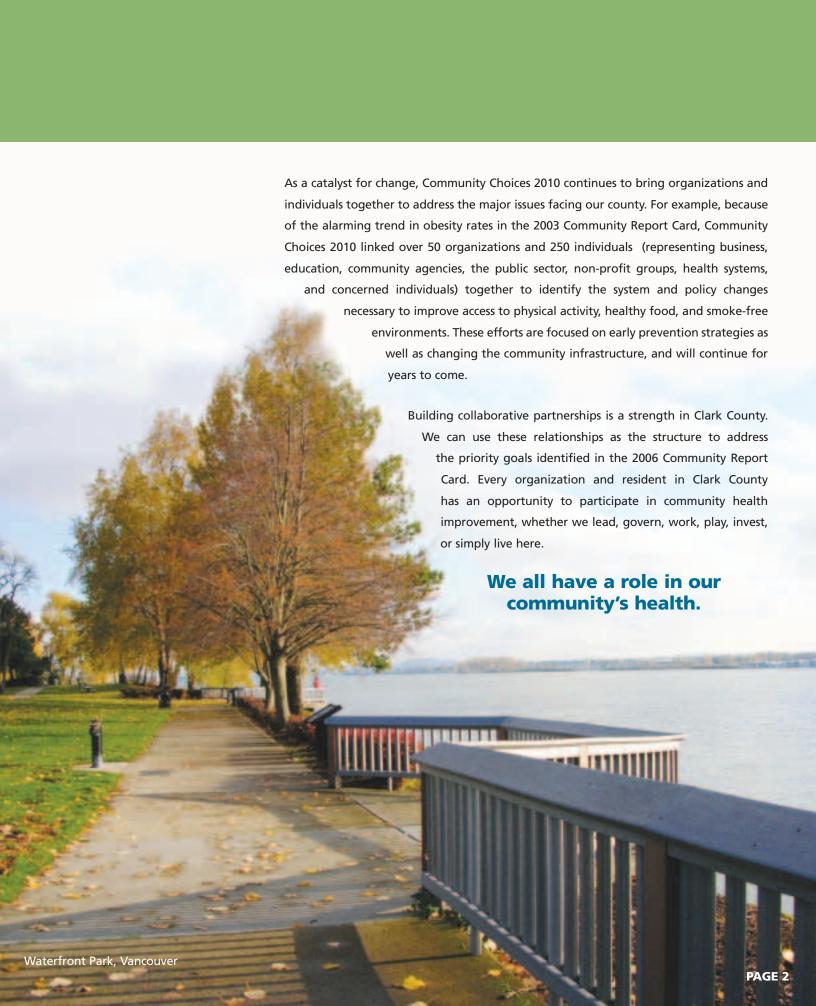
IMAGINE CLARK COUNTY AS A COMMUNITY THAT:

- Achieves a balance of economic vitality, excellent personal health, social wellbeing, and belonging;
- Embraces people of all ages, racial and ethnic groups, cultures, religions, gender, socioeconomic status, abilities, and lifestyles; and
- Works together to respond to those in need for the betterment of the community as a whole.

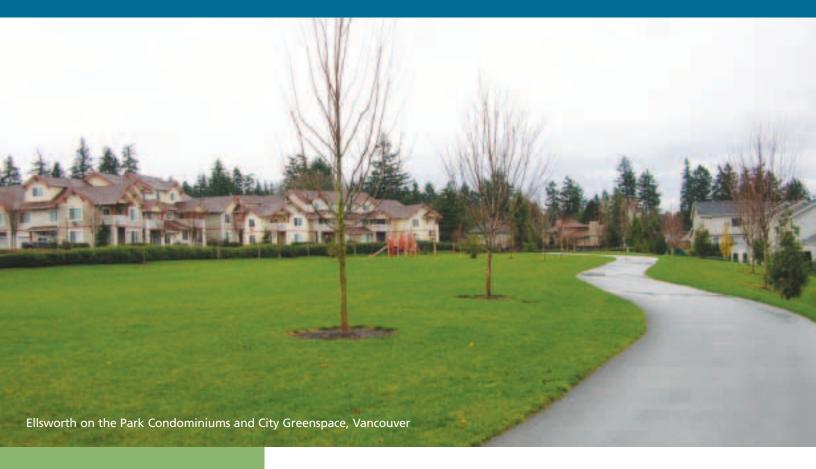
The 2006 Community Report Card is the fifth report card published by Community Choices 2010 over the past 14 years. This report card continues to provide information on the indicators and stories which best describe the overall health of Clark County. We are also monitoring our progress towards meeting target goals, where available. If there is a target goal for an indicator, this is documented by a red or green bar on the graphs. A red bar indicates that we have not yet met the target goal, while a green bar shows that we have met or exceeded the target goal.

Based on the findings from the 2006 Community Report Card, Community Choices 2010 strongly encourages all community leaders to make the following goals a priority for Clark County:

- Endorse long range growth plans that support mixed land uses, compact building design, diversified housing, increased tree canopy, and preservation of open spaces, farmland, and natural environment areas;
- Design walkable communities with a strong sense of place and convenient access to healthy food;
- Balance transportation choices for residents;
- Bring new family-wage jobs to Clark County in part by increasing the amount of land available for commercial and industrial use;
- Ensure the provision of parenting and family support services, quality child care, and early education programs for all families; and
- Create a coordinated system of health care coverage for all individuals.



ENVIRONMENTAL HEALTH



TAKING ACTION: OUTDOOR AIR OUALITY

Frito-Lay, Inc and Panasonic Shikoku Corporation of America received the 2006 Governor's Award for pollution prevention and environmental efforts.

OUTDOOR AIR QUALITY

Poor outdoor air quality contributes to health risks including respiratory illness, heart disease, and cancer. The Clean Air Act Amendment of 1990 required the development of standards for pollutants considered harmful to the public's health and the environment. Clark County is monitored for compliance with these standards by the Southwest Clean Air Agency.

GOAL: 100 percent of people breathe air that meets National Ambient Air Quality Standards (NAAQS) (EPA standard).

FINDINGS: In the 1980's, the amount of carbon monoxide (CO) in Clark County's air was at times above levels allowed by the EPA. Ozone levels were higher than health standards allowed during both the 1980's and early 1990's. This resulted in Clark County being designated as a "non-attainment" area for these pollutants. Ten-year plans for managing both CO and ozone levels were created. Clark County has not violated the NAAQS for CO since 1990 and ozone since 1998.

TAKING ACTION: URBAN TREE CANOPY

Vancouver Urban Forestry, a program run by Vancouver-Clark Parks and Recreation, has teamed with the Evergreen and Vancouver school districts to plant trees on the grounds of at least one school a year.







Clark County has experienced rapid development and population growth, which has resulted in a declining urban tree canopy. As Clark County continues to grow, preservation and restoration of the urban tree canopy becomes increasingly important to maintain quality of life for residents.

Community Choices 2010 encourages protecting and maintaining existing trees, re-treeing older neighborhoods, requiring new developments and businesses to plant trees, and facilitating the planting of new trees through community partnerships and neighborhood associations.

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TAKING ACTION: SMOKE-FREE ENVIRONMENTS

The 2006 Surgeon General's Report on secondhand smoke (SHS) concluded that there is no risk-free level of exposure to SHS. SHS causes approximately 3,400 lung cancer deaths and up to 69,000 heart disease deaths in adult nonsmokers in the U.S. each year. SHS increases the risk of asthma and bronchitis, and in children increases the risk of meningococcal disease and Sudden Infant Death Syndrome (SIDS).

In 1992, Southwest Washington Health District (now Clark County Public Health), and the Tobacco Free Coalition of Clark County created the first *Guide to Smoke-Free Dining in Southwest Washington*. By early 2005, nearly 75 percent of Clark County restaurants were voluntarily smoke-free. With the overwhelming passage of Initiative 901 by Washington voters in 2005, smoking is now prohibited in all places of employment, including restaurants, bars, taverns, bowling alleys, and bingo halls.

At the 2004 Youth Town Hall, Clark County teens urged County Commissioners to take action to protect individuals from SHS while visiting local parks. Soon after, Vancouver-Clark Parks and Recreation, Clark County Public Health, and Community Choices 2010 crafted policy language which was approved by the Vancouver City Council and Clark County Commissioners. This policy requests park users to not use tobacco products near playgrounds, ball fields, bathrooms, and on beaches and has been implemented with signage in our parks.

The rising concern of drifting smoke in multi-family rental homes has prompted Clark County Public Health, Sea Mar Community Health Center, the Tobacco Free Coalition of Clark County, and Community Choices 2010 to address SHS exposure in rental properties. Partnering with the American Lung Association of Oregon and Multnomah County Health Department, the Smoke-free Rental Housing Initiative involves regional outreach and research of property owners and residents to address this problem in the four-county area. This effort will provide renters access to smoke-free living environments.

URBAN TREE CANOPY

The urban tree canopy consists of all trees and other vegetation in a community's parks, streets, residential properties, and urban natural areas. In addition to obvious aesthetic benefits, the canopy also provides multiple economic and environmental benefits such as capturing storm water, reducing water pollution from runoff, filtering airborne particles such as dust and ash, absorbing ground-level ozone, nitrogen oxide, and sulfur dioxide, sequestering carbon dioxide, reducing stress and mental fatigue, and providing habitat for urban wildlife. Loss of urban tree canopy has significant impacts on air quality, which affects the quality of life for residents.

GOAL: 40 percent urban tree canopy (recommended for Pacific Northwest communities by American Forests, a nonprofit conservation organization working with the U.S. Forest Service). The City of Vancouver has a target goal of 28 percent.

FINDINGS: Currently the City of Vancouver's average tree canopy is 19.7 percent compared to their target goal of 28 percent.



As the population of Clark County grows and therefore the demand for water increases, local water purveyors will be required to apply to the Department of Ecology to withdraw more water than their current authorizations (water rights). While there is currently adequate water quantity, there is groundwater contamination in areas identified for future public water supply development.

Community Choices 2010 encourages the clean up of that water in an expedited manner to avoid the use of more costly locations and ensure the availability of safe drinking water to meet increasing demand.



DRINKING WATER OUALITY

Safe drinking water is vital to human life. The Safe Drinking Water Act (SDWA) of 1995 established safe standards of purity and required public/community water system operators to comply with those standards.

GOAL: 95 percent of people served by community water systems receive water that meets the health-based SDWA standards (Healthy People 2010).

FINDINGS: In 2006, Clark County meets this goal with more than 96 percent of the population served by public water systems receiving water that meets health-based SDWA standards. It is worth noting that water quality for residents who obtain drinking water from private wells is generally unknown. Testing is only required for new private wells at the time of installation.

A recent discovery indicates that there are areas in Clark County with very high levels of naturally occurring arsenic in water. This is being addressed as new private wells are permitted and is also monitored in public water systems. Residents with private wells permitted prior to 2003 should consider testing their water for arsenic.

FLUORIDATED DRINKING WATER

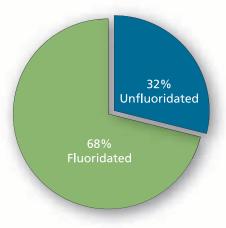
The fluoridation of drinking water to prevent dental caries (tooth decay) has been named one of the ten great public health achievements of the 20th century. Fluoridation remains the most cost-effective and equitable method of preventing dental caries in most communities. Three public/community water systems (Battle Ground, Camas, and Vancouver) currently fluoridate their water.

GOAL: 75 percent of residents served by community water systems receive optimally fluoridated water (Healthy People 2010).

FINDINGS: In 2006, of the residents estimated to be served by public water systems in Clark County, 68 percent received fluoridated drinking water. Clark County currently does not meet the target goal of 75 percent.

FLUORIDATED DRINKING WATER

Percent of 2006 Clark County population served by public water systems that have fluoridated water.





Washington State's Beyond Waste Project finds that while we live in a throw-away society, we can "transition to a society that views waste as inefficient uses of resources and believes that most wastes can be eliminated."

Waste unnecessarily uses raw resources (such as oil for plastics) on the front end and uses resources such as gas (to haul materials to landfills) that pollute our environment and increase our health risks on the back end. As individual consumers we can choose products that use less packaging materials and drink tap water rather than bottled water. Businesses can purchase products that reduce waste and implement waste reduction policies such as having printers default to print on both sides of each page.

Community Choices 2010 encourages that a community-wide education campaign of "Reduce, Reuse, and Recycle" be reinstated.

SOLID WASTE

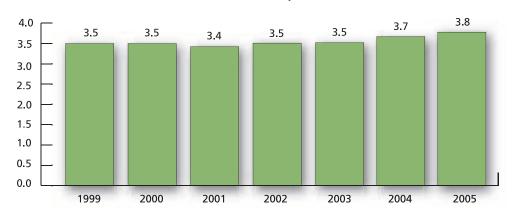
Every day each one of us consumes products. Some portions of those products are reused but many are discarded either for recycling or landfill, which creates waste. The bulk of this waste is hauled to one of two transfer stations where it is compacted into 40-foot containers and shipped by barge up the Columbia River to the Finley Buttes Regional Landfill in Morrow County, Oregon. The Department of Ecology estimates the average Washington resident discards 7.9 pounds of waste per day. By decreasing the amount of reusable and recyclable materials we send to landfills, we can contribute to the environmental, economic, and social vitality of our community.

GOAL: Reduce pounds landfilled per person per day by 5 percent by 2011, and reduce the amount of hazardous waste landfilled per year by 50 percent by 2011, both as compared to 1999 levels (Clark County).

FINDINGS: Clark County residents and businesses send an estimated 2.5 million to 3.5 million pounds of hazardous waste to the landfill annually. In 2005, the average Clark County resident landfilled 3.8 pounds of waste per day, for a county total of 270,000 tons of waste that year. This represents an increase of 7.4 percent from 1999. This rate does not meet the county's solid waste reduction goal and in fact is going in the wrong direction. It is estimated that 15 percent of this waste is comprised of food that could have been donated or composted. In addition, tens of millions of aluminum cans and plastic bottles from Clark County are landfilled each year.

LANDFILLED WASTE

Pounds landfilled per person per day in Clark County.



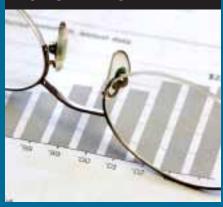
TAKING ACTION: ENVIRONMENTAL HEALTH

Legacy Salmon Creek Hospital is one of the nation's top 10 "green" hospitals. It features extensive use of natural light, gardens, low toxicity building materials, and energy efficient temperature systems.

Clark County Public Service Center and the Bonneville Power Ampere Annex Building are buildings certified for their energy and environmental design efforts.

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As of 2006, the community is at 25 percent of its trail building goal (60 of 240 miles built). While this is on track with plan goals, most new trails are limited to between one-quarter mile and one mile stretches. One of the highest priorities is to connect existing trails to form a more substantial, inclusive trail system that connects neighborhoods, mixed-use urban areas, and other destination spots. Reducing dependence on the automobile to travel short distances is a priority for our future transportation needs.

Community Choices 2010 encourages the community to support pedestrian systems that are interconnected throughout Clark County.

TAKING ACTION: PEDESTRIAN SYSTEMS

Walking is the nation's number one physical activity, and a proven factor to reduce stress and the risks of cancer, diabetes, heart disease, and stroke. Increasing walking is also one of the strategies employed to help reduce the overweight/obesity epidemic. Fundamental to supporting people's ability to walk is to have a community with safe sidewalks, trails, street crossings, and accessible routes to destination spots.

In 2005, Clark County revised the Regional Trail and Bikeway System Plan to create a safe and accessible walking and biking system that interconnects our communities, open spaces, and employment centers. The plan calls for the development of 240 miles of shared-use trails, the integration of sidewalks in all new urban residential development areas, the availability of safe walking routes within a half-mile of our public schools, and mixed-use urban areas. Currently 60 miles of trails are completed.

The economic impact of quality trail systems and improved community walkability is significant. Local success stories throughout Clark County demonstrate that housing and industry which build along trail systems, or incorporate green spaces and walkability plans, result in substantial increases in property values. Enhanced pedestrian systems surrounding school areas have also been proven to improve safety, as well as activity levels among youth. The Columbia Tech Center Walking Trail is one local trail system that integrates housing, industry, green spaces, and school areas.



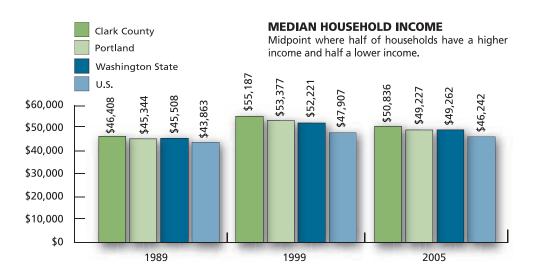
ECONOMIC HEALTH



MEDIAN HOUSEHOLD INCOME

Median household income is a common measure for indicating the economic health of a community. Household income is the sum of income received in a calendar year by all household members aged 15 years and older. National data indicate that median household incomes have risen over the past 15 years because more women are working more hours in the paid labor force.

FINDINGS: Clark County's median household income was estimated at \$50,836 in 2005, slightly higher than the median for Portland (\$49,227) and Washington State (\$49,262), and 10 percent above the nation. After adjusting for inflation, the 2005 median household income in Clark County was higher than in 1989, but was eight percent lower than in 1999, reflecting the impact of the most recent recession. Trends for Portland and Washington State were similar to Clark County.



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The conditions associated with economic distress, such as unaffordable housing, lack of family-wage jobs, and increased family mobility are significant threats to Clark County's health.

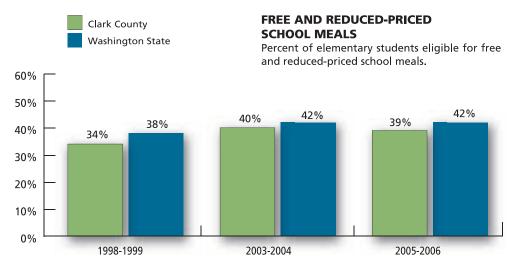
Community Choices 2010 encourages leaders to expand the growth of family-wage jobs, increase diversified and affordable housing, and revitalize high-poverty areas.



CHILD POVERTY

A nationally accepted indicator of the prevalence of child poverty within a community is the percent of children who qualify to receive free or reduced-priced meals in public schools. Eligibility is based on federal poverty guidelines and is determined by the household's income. Schools with 40 percent or more of their students meeting the eligibility requirements receive Federal Title I dollars, allowing them to hire more teachers and to provide other supplemental support.

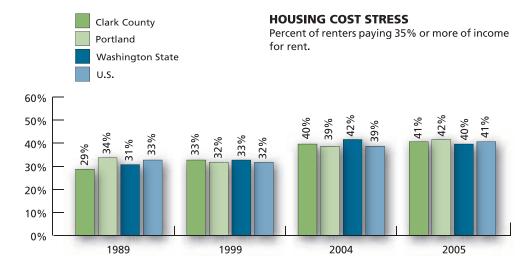
FINDINGS: The percent of Clark County elementary school students eligible for free and reduced-priced meals rose from 34 percent in 1998-99 to 39 percent in 2005-06. The recession likely played a role in the increase. Additionally, some local schools serve student populations with an inordinately high concentration of economic need. The number of low income students at local schools ranges significantly from 10 percent to 75 percent.



HOUSING COSTS

When housing costs increase faster than incomes, low-income households struggle to allocate limited dollars among housing, food, healthcare, and other basic needs. Rent exceeding 35 percent of income is generally accepted as a sign of distress.

FINDINGS: In 2005, 41 percent of Clark County renters paid more than 35 percent of their income in rent. This has increased steadily from 29 percent in 1989. The increase and the current rate in Clark County are similar to that in Portland, Washington State, and the U.S. Furthermore, in 23 percent of rental households, more than half of their income was used to pay rent.





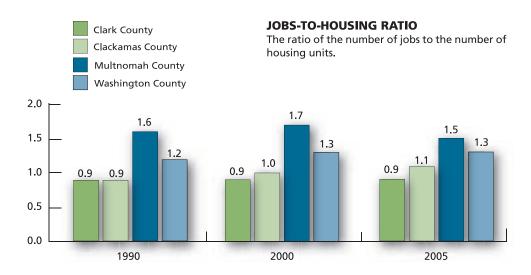
What is our shared vision for a healthy Clark County? How do we balance the needs for housing, commercial development, industrial space, jobs, schools, transportation, pedestrian systems, parks, farming, and undeveloped places? These are critical questions in determining the future health and legacy of Clark County.

Community Choices 2010 encourages all citizens in Clark County to become educated on the principles of healthy communities and smart growth. Incorporating these principles into your personal, community, and work lives will help ensure the health of Clark County. As a catalyst for change, Community Choices 2010 will sponsor community forums to build awareness, provide education, and facilitate discussion.

JOBS-TO-HOUSING RATIO

The jobs-to-housing ratio measures the rate at which employment opportunities balance with the availability of housing in a given area. With a third of the county's labor force commuting to Portland daily, Clark County is in part a bedroom community. This large outflow has an impact on the tax base, transportation system, wage base, air quality, and land use pattern. Specifically, residential property generates less in property taxes than commercial and industrial property, so the tax base is affected. Also, commuting to Portland gives county residents more opportunities to shop in Oregon.

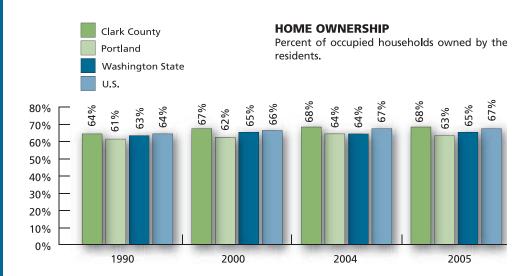
FINDINGS: In 2005, Clark County had 0.9 jobs per household. The ratio for the combined four county Portland-Vancouver area was substantially higher at 1.2. Clackamas County, which was similar to Clark County in 1990, has experienced comparable job growth and slower population growth. Accordingly, its job-to-housing ratio has increased to 1.1 in 2005.



HOME OWNERSHIP

Home ownership has long been a symbol of the American dream, providing important social and economic benefits to individual households and the communities in which they live. Home owners do not move as frequently as renters, providing more neighborhood stability. Purchasing a home is the largest investment most Americans will make in their lifetime. The value of their home creates an incentive to stay abreast of local government and community issues. In turn, a homeowner's civic engagement helps prevent crime, improve childhood education, and supports neighborhood preservation.

FINDINGS: In 2005, 68 percent of housing was owner-occupied, up slightly from 2000 (67 percent) and significantly higher than 1990 (64 percent). Home ownership is slightly more prevalent in Clark County than statewide or nationally.



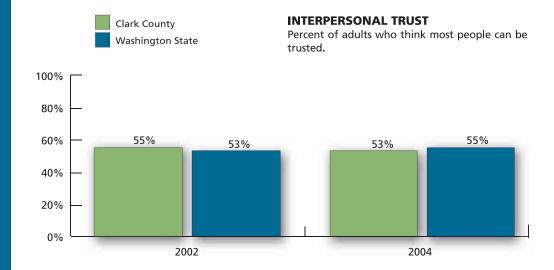
SOCIAL CONNECTEDNESS

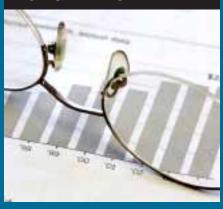


INTERPERSONAL TRUST

Interpersonal trust is one measure of social connectedness in a community. Social connectedness factors are an underlying component of health disparities among different socio-economic groups and is one of several dimensions to measure a community's civic health.

FINDINGS: In 2004, 53 percent of Clark County adults thought most people could be trusted. This is similar to the Washington State rate of 55 percent.





Understanding why a substantial percent of the population does not vote will give insight into ways the community can improve its population's social connection.

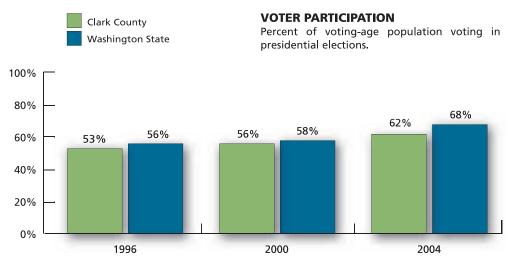
Community Choices 2010 encourages local non-partisan organizations to study local citizens' reasons for not voting (e.g., apathy, barriers such as reading level, language, mobility of population, lack of accessible information on candidates or issues, etc.) and report to the community for action.



VOTER PARTICIPATION

Citizens who participate in community decision-making tend to be more vested in their community. The percentage of eligible voters who actually cast their ballot is one indicator of the level of civic engagement in a community. High voter participation indicates that citizens feel part of their political and social institutions, and are engaged in at least one aspect of the democratic process.

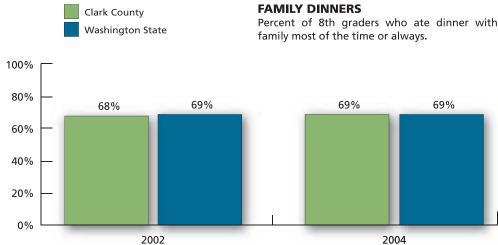
FINDINGS: Between 1996 and 2004, the percent of Clark County's voting-age population voting in presidential elections has risen substantially from 53 percent to 62 percent. However, in 2004, over one-third (38 percent) of the Clark County adult population did not exercise their right to determine who will represent them in making laws and determining how tax dollars will be spent. Clark County's 2004 voter participation of 62 percent was below the 68 percent for Washington State.



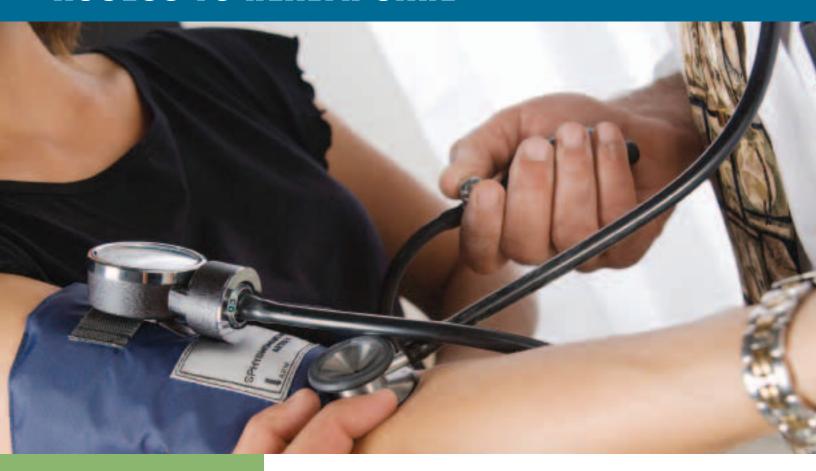
FAMILY DINNERS

Studies show that frequently eating dinner together as a family increases youth health and well-being, decreases the risk of certain delinquent behaviors such as substance abuse, poor grades, depression and suicidal thoughts or behaviors, and improves dietary intake. Family meals allow children the opportunity to learn communication skills, table manners, and good eating habits and nutrition. Studies suggest that children who have an increased frequency of family meals will also have a correlating improvement in dietary quality, such as an increase in fruit and vegetable consumption.

FINDINGS: In 2004, 69 percent of 8th graders in Clark County ate dinner with their family most or all of the time, the same as 8th graders in Washington State. The rate is simliar to the county and state rates from 2002.



ACCESS TO HEALTH CARE



TAKING ACTION: ADULTS WITH HEALTH INSURANCE

The Holland, Inc., Burgerville's Vancouver-based parent company, has made budgeting trade-offs to offer health care coverage to their employees.

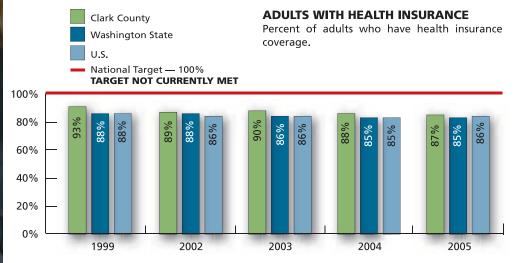
PAGE 13 Burgerville Restaurant

ADULTS WITH HEALTH INSURANCE

Health insurance is a primary factor enabling individuals to seek treatment in the early stages of a health problem, and to do so in the most cost-effective and appropriate manner. Providing prevention services and primary health care in the appropriate settings can have a positive impact on the overall cost of health care.

GOAL: 100 percent of adults have health insurance (Healthy People 2010).

FINDINGS: The percentage of residents in Clark County and throughout Washington State who have health insurance has been steadily declining since 1999. The 2005 Clark County rate of 87 percent is down 6 percentage points since 1999. The county has remained slightly higher than the state and national rates, but remains 13 percentage points away from meeting the national target. This translates to 36,977 Clark County adults who do not have health insurance.





Assuring health insurance coverage for everyone and receiving primary health care in the appropriate settings has a significant impact on controlling the overall cost of health care and the burden on public funds and employer expenses. Health plan participation in Medicaid and other subsidized programs is a means to share in the collective financial burden, while providing access to care and services through multiple delivery networks.

Community Choices 2010 encourages policy makers, community and health systems leaders, and health insurers to increase primary care access and create a coordinated system of health care coverage for all.

Simultaneously, it is essential to assure access to appropriate specialty care. One short term strategy is Project Access, a coordinated provider system that shares in the local delivery of uncompensated primary and specialty care. Other specialty care access models are also available as part of the short-term solution.



ADULTS WITH A SPECIFIC SOURCE OF MEDICAL CARE

Access to a specific, affordable source of ongoing health care typically results in higher utilization of preventive services such as blood pressure and cholesterol monitoring, as well as a greater probability of seeking care for a health problem in its early stages. Ongoing health care is an important factor in measuring the quality of life within a community. Access to ongoing care can be attributed to several factors including availability of health care insurance, lifestyle, availability of health providers, accessible transportation, and employment.

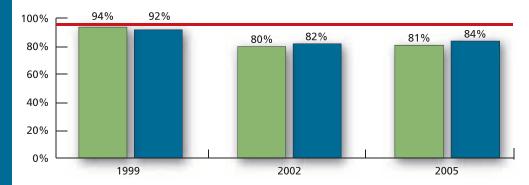
GOAL: 96 percent of the population should have a specific source of ongoing health care (Healthy People 2010).

FINDINGS: In 2005, 81 percent of Clark County adults had access to a specific source of medical care at a doctor's office or medical clinic, similar to the state rate of 84 percent. The rate has substantially decreased since 1999 and is far from meeting the national target of 96 percent.



ADULTS WITH A SPECIFIC SOURCE OF MEDICAL CARE

Percent of adults who have a specific source of medical care at a doctor's office or clinic.

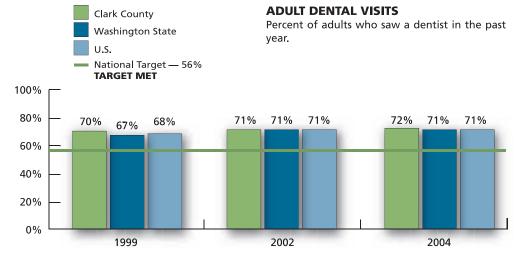


ADULT DENTAL VISITS

Annual dental cleanings and checkups are an important step towards preventing dental decay and dental disease. Chronic dental disease can contribute to serious health conditions as well as inhibit a person's ability to recover from health problems. The percent of adults seeking annual dental visits is often an indicator of accessibility to dental care. Factors influencing access include the availability of dental insurance, low-cost dental clinics, or dental schools in the area.

GOAL: 56 percent of children and adults use the oral health care system each year (Healthy People 2010).

FINDINGS: In 2004, 72 percent of Clark County adults visited a dentist over the past year, almost equal to state and national percent of 71, and exceeding the national target of 56 percent. However, there continue to be some population groups who have limited access to dental services.



EDUCATIONAL HEALTH



TAKING ACTION: READINESS TO LEARN

Numerous partnerships in Clark County are developing programs to improve outcomes for the area's youngest children. These include the Support for Early Learning and Families (SELF), which has created a Clark County Early System Plan; Southwest Washington Child Care Consortium, which provides quality child care centers; and the Clark County Early Learning Fund, which supports promising practices in early learning.



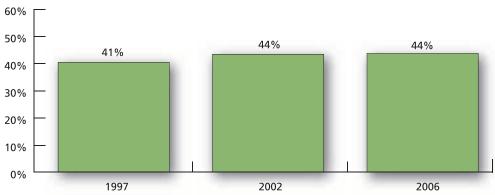
READINESS TO LEARN

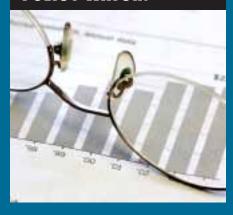
Head Start and Early Childhood Education Assistance Program (ECEAP) centers provide comprehensive early childhood education and family support. They serve children from families at or below the federal poverty level (Head Start) or at or below 110 percent of the federal poverty level (ECEAP), the most at risk and most impoverished children in our community.

FINDINGS: Data from 2006 indicate that 44 percent of eligible Clark County children aged 3 and 4 years are currently enrolled in Head Start and ECEAP programs, a rate that is relatively unchanged since 1997.

HEAD START AND ECEAP ENROLLMENT

Percent of eligible 3 and 4 year olds enrolled in Head Start and ECEAP programs.

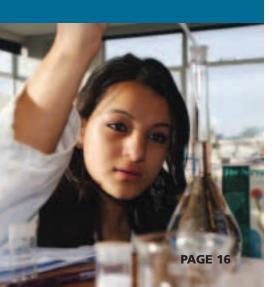




Federal and state education reform laws are raising the bar significantly by requiring universal proficiency in the public school system.

Under "No Child Left Behind," all students must meet the required academic standards by 2014. Until then, schools must make Adequate Yearly Progress (AYP). Education reform efforts are generating controversy around the country because many feel they do not provide sufficient accommodations for students needing additional supports.

Community Choices 2010 encourages policy makers to closely examine the state education study called "Washington Learns" and support implementation of suggested reforms to increase student achievement and improve educational opportunities for all.



20%

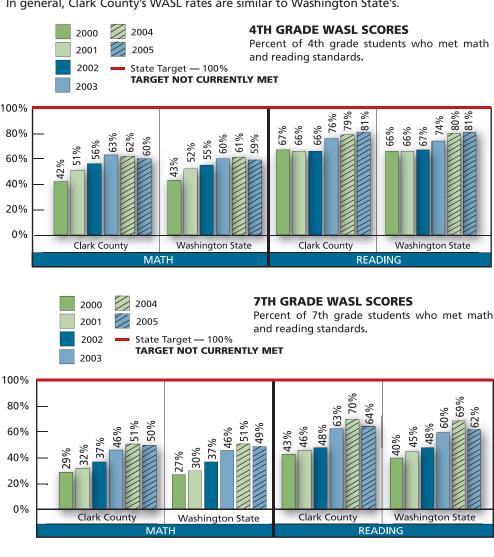
Clark County

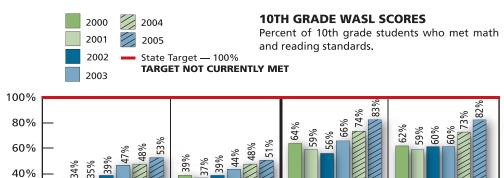
STANDARDIZED TEST SCORES

The Office of the Superintendent of Public Instruction (OSPI) implements and oversees standardized testing in Washington State public schools. The Washington Assessment of Student Learning (WASL) is the cornerstone of the state's testing program. The WASL measures student performance in several core areas on an annual basis.

GOAL: 100% of students pass the Washington Assessment of Student Learning test (OSPI).

FINDINGS: The percentage of students meeting the WASL math standards in 2005 for 4th and 7th grades was similar to the 2004 percentage, 60 percent and 50 percent respectively. The percent of 10th graders meeting the WASL math standard in 2005 increased slightly from 2004 to 53 percent. For WASL reading standards, 4th graders were somewhat consistent with earlier years at 81 percent, 7th graders showed a slight drop to 64 percent, and 10th graders increased to 83 percent. In general, Clark County's WASL rates are similar to Washington State's.



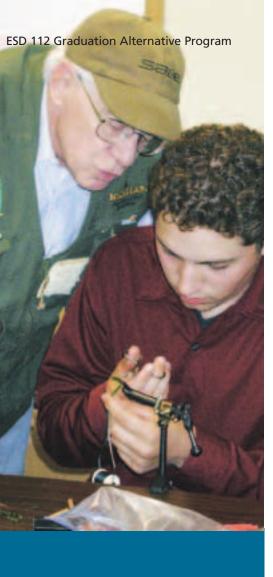


Washington State

Clark County

READING

Washington State



TAKING ACTION: ALTERNATIVE LEARNERS

Not all students, especially those with challenging life situations, can learn at optimum levels in a traditional school setting. Alternative school programs are designed to provide a unique, tailored environment to help motivate at-risk youth to obtain a high school diploma or equivalent. Many Clark County school districts offer alternative high school programs, allowing students to tailor their education and advance at their own pace toward obtaining a high school diploma.

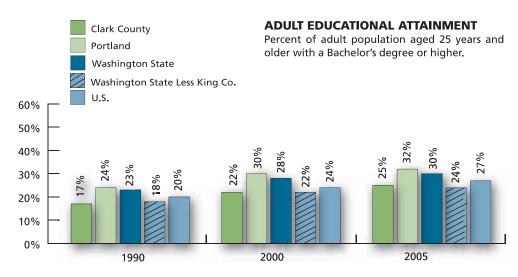
Students dealing with challenging life situations have another educational option in Clark County through the Graduation Alternative Program (GAP), administered by Educational Service District 112 (ESD 112). This option meets the needs of non-traditional learners as well as out-of-school youth to enhance a variety of academic skills and assist them in successfully passing the GED (General Education Development).

ESD 112 works in partnership with Southwest Washington school districts to provide a comprehensive GED preparation course. Using an integrated approach that combines individual and group instruction, students master academic curriculum in the areas of reading, writing, math, science and social studies. Students also prepare for the post-graduation job market by creating a portfolio and by participating in activities designed to develop employment and life skills.

ADULT EDUCATIONAL ATTAINMENT

The health of the Clark County economy, now and into the future, requires a collaborative and strategic effort to increase the number of college-educated workers. The educational level of the workforce depends in part upon the type of jobs found in the region, the local availability of higher education facilities, and the attractiveness of the community to young college graduates.

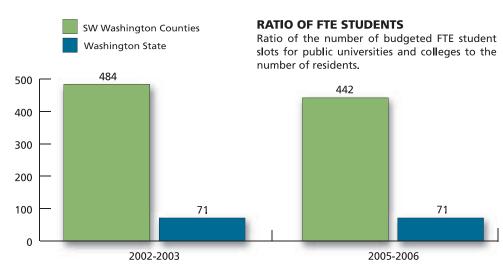
FINDINGS: In 1990, 17 percent of adults aged 25 and older in Clark County had a Bachelor's or higher degree, substantially less than state and national figures. By 2000, the share of county residents with a four-year degree or more had climbed to 22 percent, and by 2005, it was up to 25 percent. The county still falls behind the state and nation, but has closed the gap somewhat. Clark County's rate is similar to the state level after King County has been removed from the rate; however, it is below the Portland rate.



ACCESS TO HIGHER EDUCATION

In today's knowledge-based global economy, access to higher education is a critical factor in meeting the demand for high skilled jobs in the region. Southwest Washington counties (Clark, Cowlitz, Lewis, Pacific, and Wahkiakum) historically have been the most underserved areas of the state in terms of access to higher education.

FINDINGS: In 2002-2003, the state budgeted for one full-time student slot per 71 residents, while Southwest Washington received funding for only one student slot per 484 residents. By 2005-2006, state levels remained at 1:71, while Southwest Washington improved slightly to one student slot per 442 residents. While some improvement has been made with the expansion of Washington State University-Vancouver into a four-year college, this region still has a long way to go to achieve appropriate access to higher education. At the community college level, Clark College continues to be funded below the state average, and it is the second lowest funded community college in the state behind Yakima.





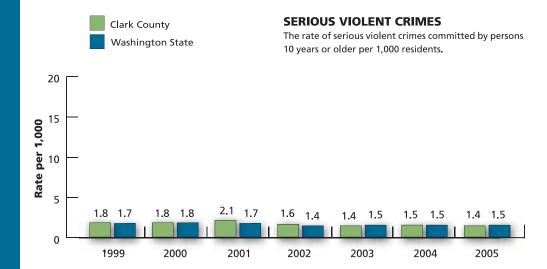
SAFETY



SERIOUS VIOLENT CRIME

An overall sense of safety and quality of life in a community can be measured in part by the rate of serious violent criminal offenses. Violent crime offenses include murder, rape, robbery, and aggravated assault. Low rates of violent crime may provide an improved sense of security and personal freedom for residents, contributing to their state of emotional and physical safety.

FINDINGS: 2005 data indicate that the rate of serious violent crimes in Clark County was 1.4 offenses per 1,000 residents; a rate similar to the state rate, relatively unchanged since 2003, and a decrease since 1999.





The old adage, "an ounce of prevention is worth a pound of cure" is borne out in many areas of this report card; perhaps though no more important than with our youngest and most vulnerable citizens—our children.

Research now demonstrates that what happens during the prenatal period and the first three years of a child's life has major impact on that child's brain development and their ability to achieve a healthy start on life. Known risks for negative effects on brain development include abusive or neglectful care, dangerous or toxic environments and drugs, inadequate nutrition, and specific infections.

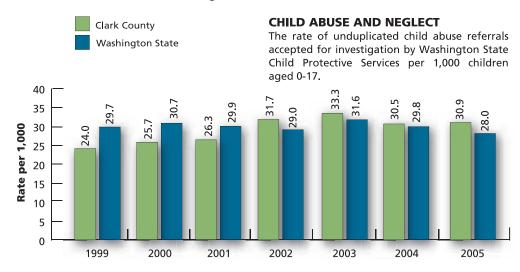
Community Choices 2010 encourages policy makers to maintain and increase support for:

- Universal prenatal care for pregnant women and medical and dental care for children;
- Parenting and family support services (such as Nurse-Family Partnership, Parents as Teachers, Birth to Three, etc.) that are research-proven; and
- Quality child care and early education services, including Head Start and Early Childhood Education Assistance Programs (ECEAP).

CHILD ABUSE AND NEGLECT

Breaking the cycle of child abuse and neglect is a critical factor in ensuring the health of our community and its individual residents. Physical and emotional abuse puts children at risk for low self-esteem, poor school performance, substance abuse, and juvenile delinquency. Statistics demonstrate that children who are abused or who live in homes with domestic violence are more likely to become abusers themselves. A myriad of social, cultural, and socioeconomic factors contribute to this problem, including unemployment, substance abuse, poverty, lack of education, and unintended pregnancy.

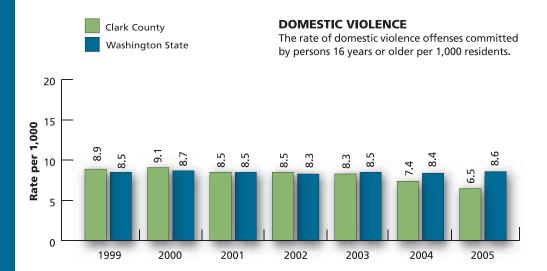
FINDINGS: In 2005, the rate of unduplicated cases of child abuse was 30.9 per 1,000 children aged 0-17, slightly higher than the state rate of 28.0 per 1,000. The Clark County 2005 rate has increased from the 1999 rate of 24.0 per 1,000. The increase since 1999 may be attributable to several factors including: the recession and increased poverty, increased methamphetamine abuse, and changes in response to Child Protective Services abuse and neglect referrals.



DOMESTIC VIOLENCE

The rate of domestic violence offenses is a significant indicator of the quality of family relationships in a community as well as substance abuse, economic conditions, and psychological/emotional problems. At its core, domestic violence is an act to gain power and control over another. Offenses considered in this indicator include murder, forcible rape, robbery, aggravated assault, simple assault, burglary, larceny/theft, motor vehicle theft, arson, or violation of protective custody orders.

FINDINGS: In 2005, there were 6.5 offenses per 1,000 residents, demonstrating the lowest rate since 1999 and lower than the state rate of 8.6 per 1,000.

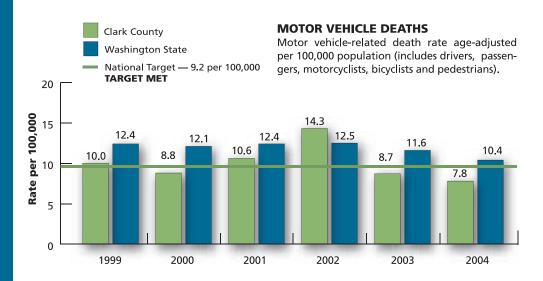


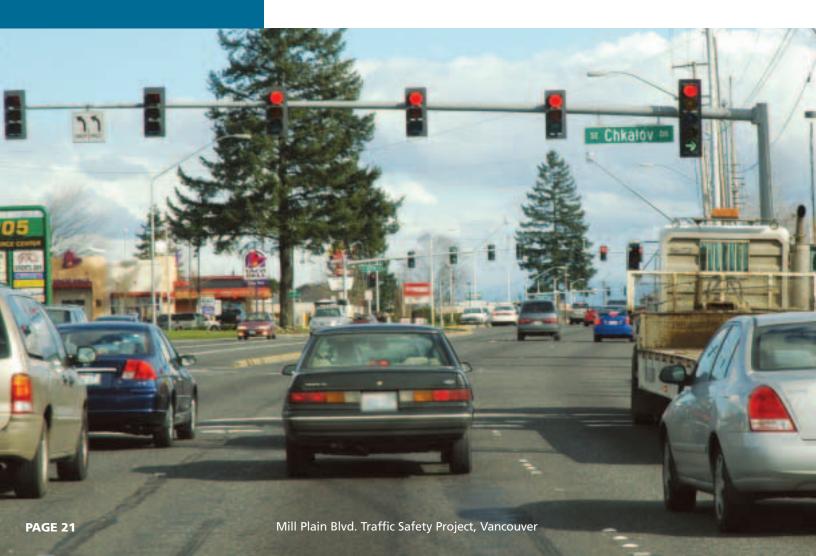
MOTOR VEHICLE-RELATED DEATHS

Motor vehicle crashes are a major cause of unintended death in Clark County, Washington State, and the nation as a whole. Refusal to wear seatbelts and driving while intoxicated are two major factors in motor vehicle-related fatalities. The rate includes deaths to drivers, passengers, pedestrians, motorcyclists, and bicyclists.

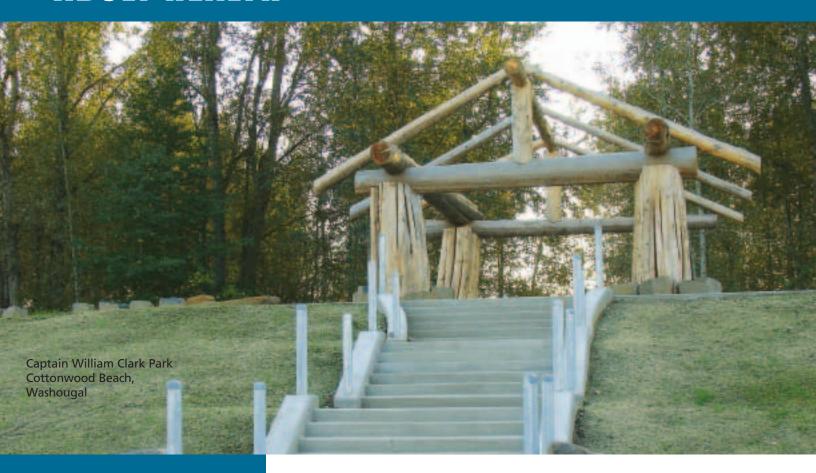
GOAL: No more than 9.2 motor vehicle crash-related deaths per 100,000 (Healthy People 2010)

FINDINGS: 2004 data indicate a motor vehicle death rate of 7.8 per 100,000 in Clark County, lower than the rate of 10.4 per 100,000 in Washington State. With a general decline in the rate, Clark County meets the target goal.





ADULT HEALTH

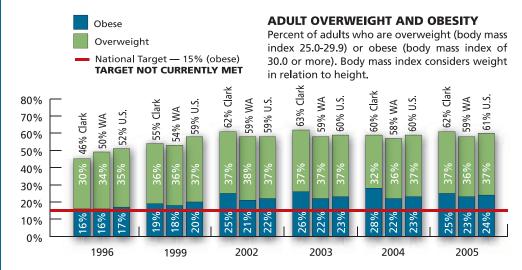


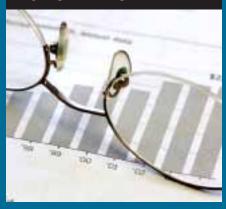
OVERWEIGHT AND OBESITY

Each year, obesity causes at least 300,000 deaths in the U.S. and healthcare costs of adults with obesity amount to approximately \$100 billion. Excess weight and obesity contribute to a greater risk of heart disease, Type 2 diabetes, cancer, breathing problems, arthritis, impaired mobility, and other health complications.

GOAL: No more than 15 percent of adults are obese (Healthy People 2010).

FINDINGS: 2005 data indicate one-quarter of all adults in Clark County are considered obese, far from meeting the target goal of 15 percent. More than one-third additional adults are considered overweight (37 percent) for a combined total overweight/obese adult population of 62 percent. Clark County rates are very similar to rates statewide and nationwide. The rate of overweight or obese adults has risen significantly since the mid-1990s. Clark County statistics show that a greater percentage of adult males (about 70 percent) are either overweight or obese compared to females (about 50 percent).





Providing convenient and affordable access to fresh fruits and vegetables is the key to increasing consumption. This includes the availability of grocery stores in all neighborhoods, farmer's markets throughout the community, working with local farmers to bring fruits and vegetables to schools and the community, and encouraging restaurants to increase healthy choices.

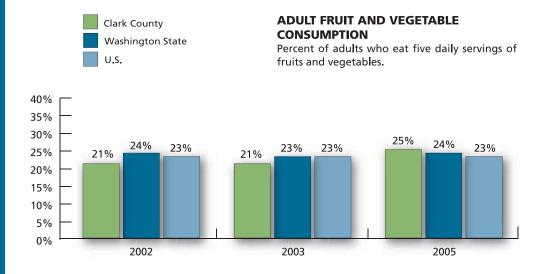
Community Choices 2010 encourages the development of a Food Policy Council for Clark County as a means to address long range local food planning for our community.



FRUIT AND VEGETABLE CONSUMPTION

Eating plenty of fruits and vegetables can help ward off heart disease and stroke, aid in controlling blood pressure and cholesterol, reduce the risk of diabetes, and prevent some types of cancer. Few adults in our country consume an adequate amount of fruits and vegetables to realize these benefits. The latest dietary guidelines call for five to thirteen servings of fruits and vegetables a day, depending on a person's caloric intake. The average American gets a total of just three servings of fruits and vegetables a day.

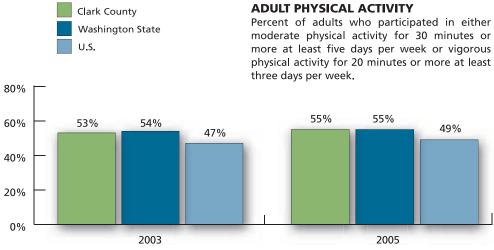
FINDINGS: 2005 data indicate that only 25 percent of Clark County adults consume five or more daily servings of fruits and vegetables. The Clark County rate is similar to both the Washington State rate of 24 percent and the national rate of 23 percent.



PHYSICAL ACTIVITY

Overwhelming scientific evidence indicates that regular physical activity can be linked to a longer lifespan and lowered risk of major illnesses including heart disease, diabetes, and cancer. Communities with a high proportion of adults who have no regular physical activity tend to have a higher rate of illness or disease. This measure includes both moderate activities resulting in small increases in breathing or heart rate and vigorous activities resulting in large increases in breathing or heart rate.

FINDINGS: 2005 data indicate that 55 percent of adults in Clark County engage in either moderate or vigorous physical activity, a rate that is consistent with the statewide rate and above the national rate.





TAKING ACTION: STEPS TO A HEALTHIER CLARK COUNTY

In 2003, Community Choices 2010 was awarded a Steps to a HealthierUS grant to focus on obesity, diabetes, and asthma and to address policy and system change that would increase equitable access to healthy food, physical activity, and smoke-free environments. Through a network of partners representing 50 organizations and over 250 individuals, permanent changes are being made, including:

- Over 20,000 individuals are using the Clark County Walkaround Guide as an informational tool to increase physical activity;
- Clark College has become the first tobacco-free college campus in the state of Washington;
- Clark County has implemented a nutrition policy for all county employees;
- School districts are integrating physical activity curriculum into their classrooms and converting to healthy food and beverages in their vending machines; and
- Diabetic patients are being proactively managed to improve care outcomes.

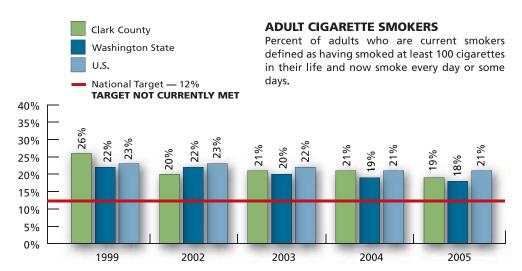
The importance of focusing on policy and system change cannot be overemphasized when attempting to create sustainable change. It is precisely this kind of change that is required to address the major chronic disease health threats of today that have us on the brink of decreasing the life expectancy of today's children over that of their parents.

CIGARETTE SMOKING

With over 4,000 chemical compounds present in inhaled smoke, many of which are cancer causing, the effects of smoking are destructive on an individual's health. Smoking increases the risk of heart disease, stroke, lung cancer, and chronic lung diseases. Equally important, secondhand smoke is a significant contributor to the development of asthma in children.

GOAL: No more than 12 percent of adults are cigarette smokers (Healthy People 2010). **FINDINGS:** 2005 data indicate that 19 percent of adults smoke in Clark County compared to 26 percent in 1999. County rates of adult smokers have remained similar to those of the state and nation. The county is still far from meeting the national

target of 12 percent.

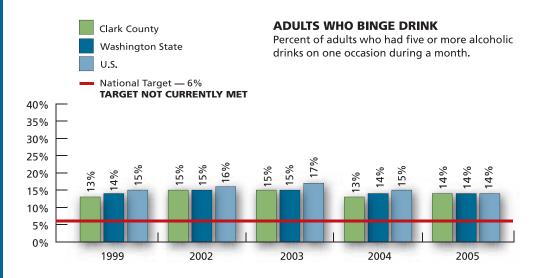


BINGE DRINKING

Studies have found that people who consume five or more alcoholic drinks on an occasion (referred to as binge drinkers) were 14 times more likely to drive while intoxicated than non-binge drinkers. Dangers linked to binge drinking include injuries, unintended pregnancy, and sexual and physical abuse.

GOAL: No more than 6 percent of adults binge drink (Healthy People 2010).

FINDINGS: 2005 data indicate that 14 percent of Clark County adults binge drink, the same rate as Washington State and nationwide, but more than double the national target. Data show that among binge drinkers in Clark County, 52 percent were aged 18-34, and overall, 77 percent of binge drinkers were male. Clark County rates have remained relatively consistent since 1999.

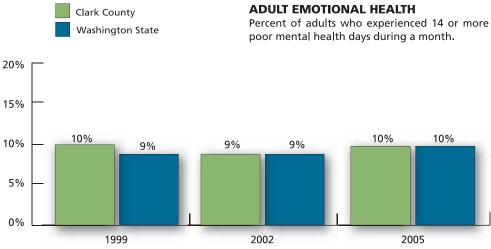




EMOTIONAL HEALTH

Adults who usually experience positive emotional health typically have a lower risk of substance abuse, crime, poor job performance, and poor physical health. The rate of emotional health within a community may be influenced by a variety of factors, including the availability of emotional support systems, access to physical activity, and the availability of adequate mental health resources and services. Those individuals with 14 or more days of poor mental health in a single month could be considered to have frequent mental distress.

FINDINGS: 2005 data indicate that 10 percent of Clark County adults, and adults statewide, experienced 14 or more days of poor mental health in a single month. This rate has been fairly consistent since 1999.



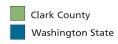
YOUTH HEALTH



EMOTIONAL HEALTH

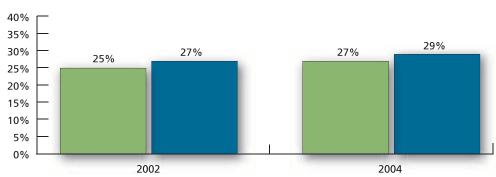
Youth who experience positive emotional health typically have lower incidence of unhealthy behaviors, including substance abuse, criminal behavior, poor school performance, and poor physical health. When students feel so sad or hopeless for extended times that they stop doing their usual activities they are said to have poor emotional health.

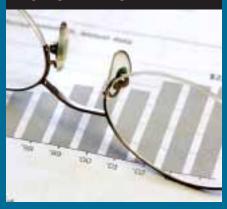
FINDINGS: 2004 data indicate that just over one quarter of 8th graders have poor emotional health, or 27 percent; a rate similar to the state level.



YOUTH EMOTIONAL HEALTH

Percent of 8th graders who felt so sad or hopeless almost every day for two consecutive weeks or more in a row during 12 months that they stopped doing some usual activities.





With the rates of childhood obesity increasing, the need for action is now. The Washington State Legislature passed SB 5436 in 2004 requiring every school district to adopt a written policy addressing nutrition and physical activity in schools. Federal law 108-265 also requires that all schools participating in the national school lunch program establish a local school wellness policy.

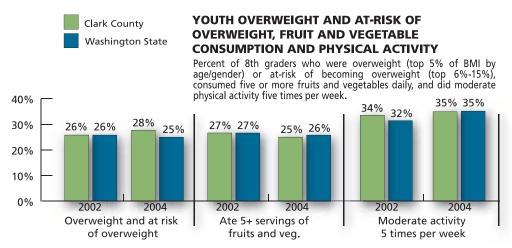
Community Choices 2010 encourages the following actions:

- Increase opportunities for children, in school and out-of-school, to participate in lifelong physical activity, which will also have an impact on the emotional health of youth;
- Increase healthy food and beverage options in school cafeterias, vending machines, student stores, and event concessions;
- Support accountability with school boards and action in schools by implementing Community/School Health Advisory Councils;
- Encourage restaurants to offer children's menus with healthy choices; and
- Educate parents and children on practical ways to increase physical activity and proper nutrition and encourage family meals.

OVERWEIGHT AND AT-RISK OF OVERWEIGHT, FRUIT AND VEGETABLE CONSUMPTION, AND PHYSICAL ACTIVITY LEVEL

As with adults, there has been a dramatic increase in the percent of youth who are overweight in recent years. The concern for health is that these youth may be at increased risk of developing preventable diseases such as Type 2 diabetes, hypertension, and heart disease, among others. Poor nutrition and lack of regular moderate physical activity are risk factors which impact academic performance. Obesity in children and adolescents is a serious issue contributing to many health and social consequences that often continue into adulthood as well as have a significant financial impact on the healthcare system and workplaces.

FINDINGS: 2004 data indicate that more than one quarter of 8th graders in Clark County are either overweight or at-risk of becoming overweight, while only 25 percent of youth consumed five or more servings of fruits and vegetables daily. More than one third of Clark County youth engaged in moderate activity five times per week. These rates are similar to the rates for Washington State.

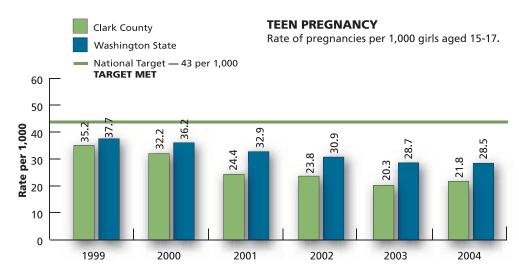


TEEN PREGNANCY

According to the National Campaign to Prevent Teen Pregnancy, only one in every three teen mothers receives a high school diploma, and only 1.5 percent have a college degree by age 30. Nearly 80 percent of unmarried teen mothers seek public assistance or welfare. Infants born to teen mothers are at greater risk for child abuse, and are more likely to perform poorly in school. National research indicates that the drop in U.S. teen pregnancy is due to changes in the behavior of sexually active teens choosing more effective methods of contraception and increased abstinence.

GOAL: No more than 43 pregnancies occur per 1,000 girls aged 15 to 17 (Healthy People 2010).

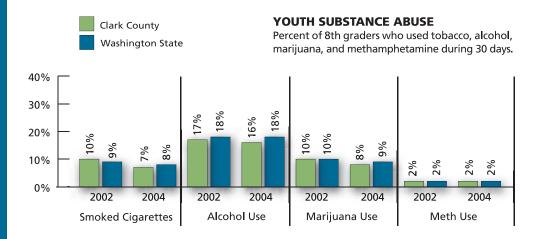
FINDINGS: The rate of teen pregnancy in Clark County has steadily declined from the 1999 rate of 35.2. The 2004 Clark County rate of 21.8 is lower than the Washington State rate of 28.5. Clark County far and beyond meets the national target goal.



SUBSTANCE ABUSE

There are currently a wide range of known risk factors that contribute to the likelihood of substance abuse problems among youth, including troubled family and peer relationships, low achievement in school, and social and developmental pressures. Communities with a high rate of youth substance abuse may also have a high rate of these common risk factors. As a new indicator, methamphetamine use has far-reaching consequences for users and the community. Even a small percentage of youth methamphetamine abusers is significant in the area of youth substance abuse.

FINDINGS: 2004 data for 8th graders indicate that alcohol continues to be the most used substance among youth in Clark County (16 percent) and statewide. Cigarette and marijuana use are similar at 7 and 8 percent respectively. Methamphetamine use was 2 percent in both 2002 and 2004. All Clark County rates are similar to statewide rates.

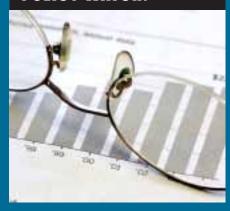




TAKING ACTION: YOUTH HEALTH

The Youth House is one local resource for our community's teens. This youth empowerment center was developed by the Clark County Department of Community Services. The foundation of the Youth House is the Forty Developmental Assets developed by the Search Institute in Minnesota. Building on the fact that the more assets young people have the more likely they are to grow, be healthy, and be productive, the following Youth House programs are supported to increase the number of assets among Clark County youth.

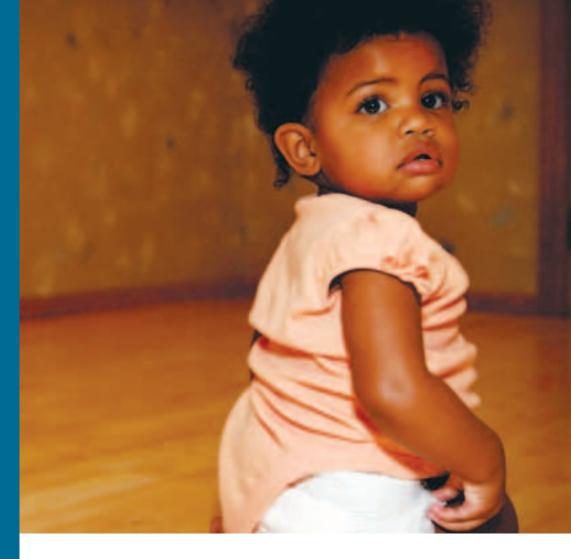
- Teen Talk offers support to youth about the many issues youth are facing via the phone and through the Internet;
- The Youth Commission is a youth driven advisory board comprised of youth aged 11-19. They advise the Board of County Commissioners, county departments, and community organizations by providing a youth-oriented point of view;
- Youth Leaders Educating Against Destructive Decisions is a team of youth substance abuse prevention advocates who increase awareness, support prevention efforts, and encourage youth to make healthy choices in regard to alcohol, tobacco and other drugs; and
- Youth in Transition project is building a system of treatment options to address the
 particular difficulties that youth with serious emotional disturbances or serious
 mental illnesses face in making a successful transition to adulthood.



The national goal for childhood immunization is that 90 percent of children be fully immunized by 35 months of age. Today, public health officials lack data to know the immunization level in the community and to understand the local reasons for young children not being fully immunized.

Community Choices 2010 encourages the following actions:

- Funding regular immunization studies to benchmark immunization levels and continually evaluate progress in reaching national targets;
- Obtaining information from parents/guardians of un- and underimmunized children to understand what prevents them from fully immunizing their child; and
- Providing incentives to medical practitioners to encourage their use of the free Child Profile immunization registry.



TAKING ACTION: CHILDHOOD/ADOLESCENT IMMUNIZATIONS

Next to clean drinking water and sanitation, childhood immunizations are the most important public health accomplishment that markedly improves the health of our children and our community. Un- and under-immunized children are susceptible to a wide range of childhood illnesses that can lead to ear infections, pneumonia, encephalitis/meningitis, deafness, sterility, seizures, and even death. These children also pose a threat to those who are too young to be immunized, who can't be immunized because of medical reasons, or those who did not develop a sufficient immune response following vaccination. Further, if a significant number of children are not fully immunized, disease outbreaks become more likely, leading to preventable illness, disabilities, and death.

Washington State currently funds an immunization registry called Child Profile. This secure, web-based system allows health care providers to enter and find immunization records to determine which immunizations are needed. It also allows for the easy distribution of immunization reminder mailings to parents, as well as health promotion mailings providing information about growth, development, child safety, nutrition and other children's health issues. Seventy-four percent of Clark County pediatric and family practice providers can access the system, but only 50 percent of those providers enter data on their patients.

DATA SOURCES

Outdoor Air Quality	Southwest Clean Air Agency
Urban Tree Canopy	Clark County Assessment and GIS; Vancouver-Clark Parks and Recreation Department
Drinking Water Quality	Washington State Department of Health, Division of Environmenta Health, Office of Drinking Water
Fluoridated Drinking Water	Washington State Department of Health, Division of Environmenta Health, Office of Drinking Water
Solid Waste	Clark County Public Works, Solid Waste Program
ECONOMIC HEALTH	
Median Household Income	US Census Bureau
Child Poverty	Washington Office of Superintendent of Public Instruction
Housing Costs	US Census Bureau
Job-to-Housing Ratio	US Census Bureau; Washington Employment Security Department Oregon Employment Department
Home Ownership	US Census Bureau
SOCIAL CONNECTE	DNESS
Interpersonal Trust	Behavioral Risk Factor Surveillance System
Voter Participation	Clark County Auditor's Office, Elections Department
Family Dinners	Healthy Youth Survey
ACCESS TO HEALTH	I CARE
Adults with Health Insurance	Behavioral Risk Factor Surveillance System
Adults with Specific Source of Medical Care	Behavioral Risk Factor Surveillance System
Adult Dental Visits	Behavioral Risk Factor Surveillance System
EDUCATIONAL HEA	LTH
Readiness to Learn	Educational Opportunity for Children and Families
Standardized Test Scores	Washington Office of Superintendent of Public Instruction
Adult Educational Attainment	US Census Bureau
Access to Higher Education	State Higher Education Board

SAFETY		
Serious Violent Crime	Washington Association of Sheriffs and Police Chiefs	
Child Abuse and Neglect	Washington State Department of Social and Health Services	
Domestic Violence	Washington Association of Sheriffs and Police Chiefs	
Motor Vehicle-Related Deaths	Washington State Department of Health, Center for Health Statistics	
ADULT HEALTH		
Overweight and Obesity	Behavioral Risk Factor Surveillance System	
Fruits and Vegetable Consumption	Behavioral Risk Factor Surveillance System	
Physical Activity	Behavioral Risk Factor Surveillance System	
Cigarette Smoking	Behavioral Risk Factor Surveillance System	
Binge Drinking	Behavioral Risk Factor Surveillance System	
Emotional Health	Behavioral Risk Factor Surveillance System	
YOUTH HEALTH		
Emotional Health	Healthy Youth Survey	
Overweight and At-Risk of Overweight; Fruit and Vegetable Consumption; and Physical Activity	Healthy Youth Survey	
Teen Pregnancy	Washington State Department of Health, Center for Health Statistics	
Substance Abuse	Healthy Youth Survey	

ACKNOWLEDGEMENTS

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Clark County Public Health's mission is your good health. Together we prevent disease and injury, promote healthier choices, protect food, water and air, and prepare for emergencies. Clark County Public Health serves all of Clark and Skamania counties and is always working for a safer and healthier community. Learn more at www.clark.wa.gov/health





Since opening in 2005, Legacy Salmon Creek Hospital has become a leader in caring for families in Clark County. The region's newest, most technologically advanced hospital offers a full range of services, including pediatric and adult emergency care, pediatric inpatient unit, cancer services, surgery, diagnostics, women's services and the area's only level III intensive care unit for premature and ill babies. Learn more at **www.legacyhealth.org**



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At Southwest Washington Medical Center our vision is clear – provide exceptional medicine, extraordinary care for every person. As a five-time winner of the 100 Top National Hospitals® award, Southwest provides clinical excellence, advanced technology, and compassion care. And, with the opening of the E.W. and Mary Firstenburg Tower, Southwest becomes Clark County's newest and most experienced hospital. Learn more at **www.swmedicalcenter.org**



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